



PTO/SB/22 (06-04)

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APPLICATION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional) 367758001US1	
Application Number 10/729,435-Conf. #8401		Filed December 5, 2003	
For BALL JOINT SYSTEM FOR DRYWALL FINISHING TOOL			
Art Unit 3679		Examiner Not Yet Assigned	
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):			
		<u>Fee</u>	<u>Small Entity Fee</u>
<input type="checkbox"/>	One month (37 CFR 1.17(a)(1))	\$110.00	\$55.00 \$
<input type="checkbox"/>	Two months (37 CFR 1.17(a)(2))	\$420.00	\$210.00 \$
<input type="checkbox"/>	Three months (37 CFR 1.17(a)(3))	\$950.00	\$475.00 \$
<input checked="" type="checkbox"/>	Four months (37 CFR 1.17(a)(4))	\$1,480.00	\$740.00 \$ 740.00
<input type="checkbox"/>	Five months (37 CFR 1.17(a)(5))	\$2,010.00	\$1,005.00 \$
<input checked="" type="checkbox"/>	Applicant claims small entity status. See 37 CFR 1.27.		
<input checked="" type="checkbox"/>	A check in the amount of the fee is enclosed.		
<input type="checkbox"/>	Payment by credit card. Form PTO-2038 is attached.		
<input type="checkbox"/>	The Director has already been authorized to charge fees in this application to a Deposit Account.		
<input checked="" type="checkbox"/>	The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 50-0665. I have enclosed a duplicate copy of this sheet.		
I am the	<input type="checkbox"/>	applicant/inventor.	
	<input type="checkbox"/>	assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).	
	<input type="checkbox"/>	attorney or agent of record. Registration Number	
	<input checked="" type="checkbox"/>	attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a) 33,904	
		September 10, 2004	
	Signature	Date	
	Edward S. Hotchkiss	(206) 359-8000	
	Typed or printed name	Telephone Number	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below			
<input type="checkbox"/>	Total of 1 forms are submitted.		

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV528706035US, in an envelope addressed to: MS Missing Parts, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: 9/10/04

Signature: Melody Almberg (Melody Almberg)